

FILM REQUEST FORM FOR THE CITY OF BURBANK

Attn: Norma Brolsma

Phone: 818-238-3100 Fax 818-238-3109

Request By: _____
Company: _____
City, State: _____
Title: _____
Location Manager: _____
Director: _____
Producer: _____

Phone: _____ Date: _____
Address: _____
Phone: _____
Type: _____
Pager or Cell: _____
1st A.D.: _____
Production Manager: _____

DATE(S) (MAXIMUM 7 DAY PERIOD)	DAY(S) OF THE WEEK	ARRIVAL TIME/WRAP TIME

LOCATION(S) : _____

TYPE OF ACTIVITY: _____

ACTIVITY INVOLVES: ☐ ALTERATION OF LANDSCAPE ☐ AUTO STUNT ☐ DRIVING SHOTS ☐ PHYSICAL FIGHTING
☐ SPECIAL EFFECTS (SEE FIRE DEPT. PERMIT) ☐ WEAPONS ☐ ANIMALS • WILL ANY CITY FACILITY AND/OR BUILDING
BE USED IN FILMING? _____ IF SO, CITY FACILITY ADDENDUM MUST BE ATTACHED. ☐ TENTS/CANOPIES

STREETS TO BE POSTED: _____

CITY PARKING LOTS USED: _____

APPROVED BY TRAFFIC ENG. _____

VEHICLE TOTALS: TRUCKS _____ DRESS RMS. _____ VANS _____ PICTURE CARS _____ CONDORS _____
GENERATOR(S) _____

CAST/CREW: _____ NUMBER OF OFFICERS NEEDED: FOOT MOTOR FIRE

OFFICERS REPORT TO: _____ LOCATION _____ TIME _____

POLICE OFFICERS ASSIGNED:

DATE/TIME:	OFFICER:	DATE/TIME:	OFFICER

☐ FIRE ☐ TRAF. ENG. ☐ PARKS ☐ COMM. CTR. ☐ FILM COMPANY ☐ OTHER _____

FEES: PERMIT \$ _____ MOTORCYCLES \$ _____ CITY PROPERTY \$ _____ OTHER(S) \$ _____